

---

# NEURODIVERSITY IN GP TRAINING

Dr Neetul Shah, GP Trainer, Primary Care Fellow in Equality Diversity and Inclusion



# ND IN GP TRAINING

What is ND?

Impact on trainees

Impact on trainers

Develop a better understanding



## DR JESSICA – GPST2



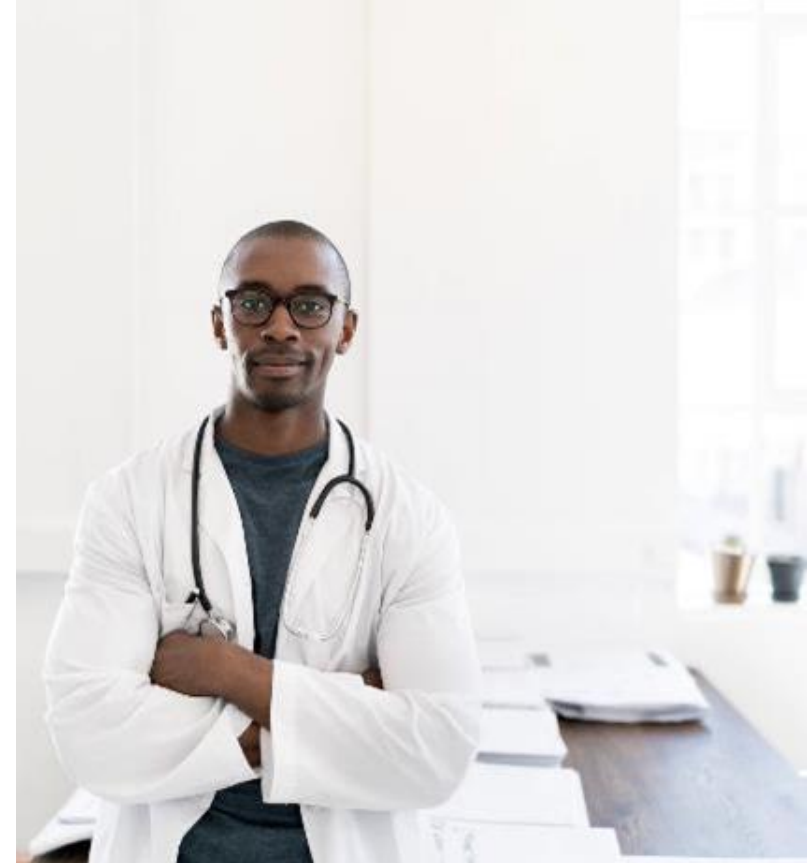
known autism since childhood  
moved from another GP placement



# FEEDBACK FROM JESSICA

At initial meeting with CS

- Would prefer to be in one room for the placement of possible
- Would like to know her rota and room allocation in advance
- Away from the nursing room as was very noisy during baby immunisation clinics in previous practice



## OTHER FEEDBACK

- **During COTs and joint surgeries:**

- Overrunning appointment times
- Not picking up cues from patients

- **From MSF:**

- 'Doesn't contribute to team meetings'
- 'Goes for a walk or stays in her room at lunch time, doesn't join receptionists for lunch'

- **Other colleague feedback:**

- Overrunning surgery times regularly (from other debriefing GPs)
- Rota co-ordinator has had multiple emails about her room changes
- Leaving late due to admin duties

**Q. What other challenges would you anticipate or need to be aware of ?**



**What other challenges would you anticipate or need to be aware of?**

① Start presenting to display the poll results on this slide.





# NEURODIVERSITY

What is it?

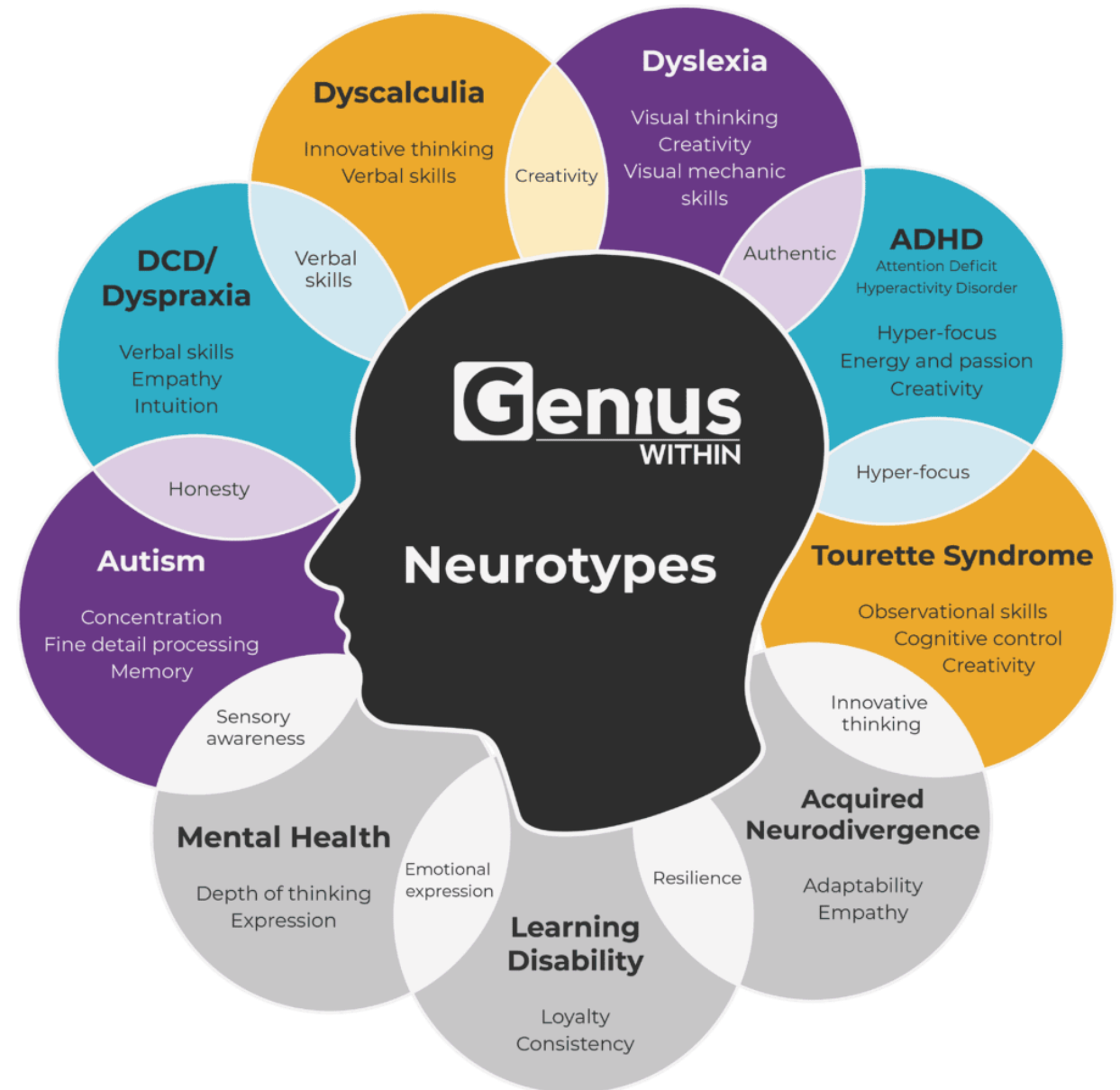


# What is neurodiversity?



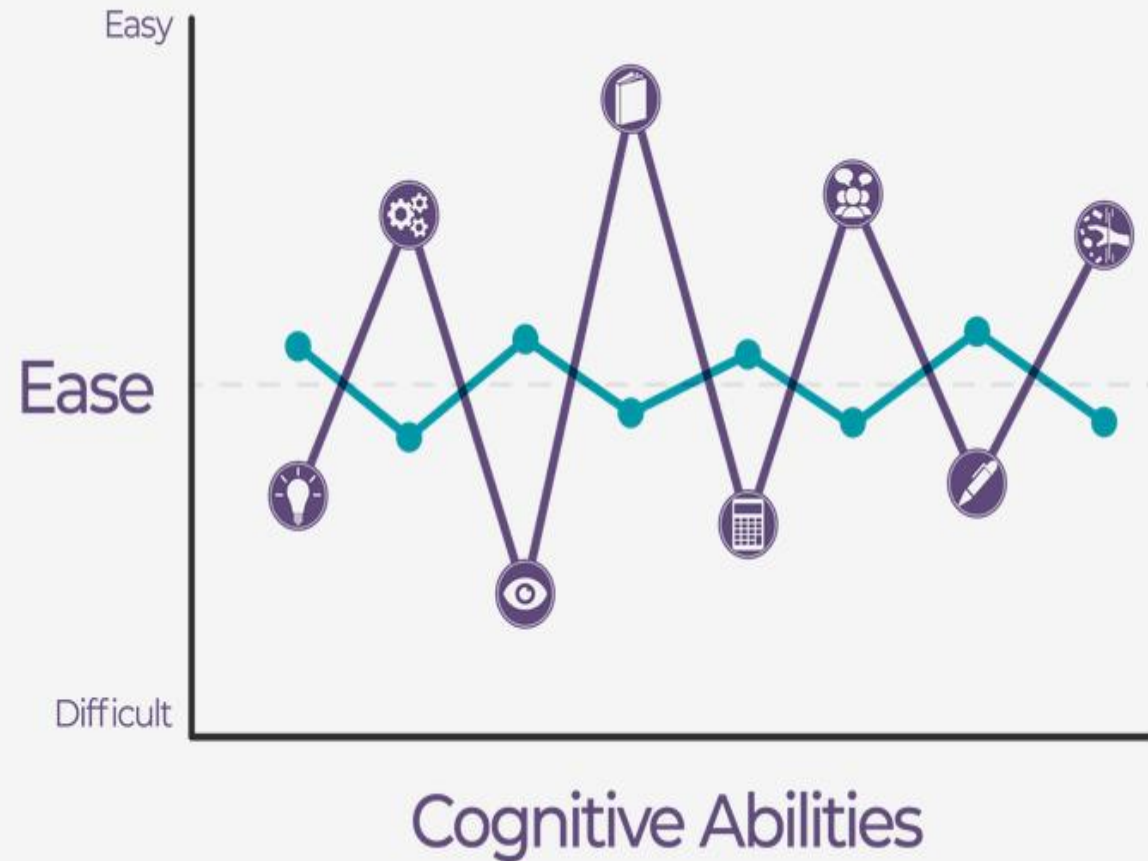
# WHAT IS NEURODIVERSITY?

- A concept that all humans vary in terms of our neurocognitive ability.
- Everyone has both talents and things they struggle with.
- However, for some people the variation between those strengths and challenges is more pronounced.
- This can bring advantage but can also be disabling.



## SPIKY PROFILE

- a pattern of cognitive abilities and skills where an individual's strengths and challenges vary significantly
- this variation is in comparison to a neurotypical brain where the challenges and strengths are not as pronounced
- Ease of mastery



geniuswithin.org

---

# Neurodiversity in the general practice workforce

**Dr Catherine Bell** 

Salaried GP at The Valleys Medical Partnership, North East Derbyshire

GP trainer with Chesterfield GP training programme

Equality, Diversity and Inclusion Fellow for Neurodiversity with GP Task Force Derbyshire

Email: Catherine.bell17@nhs.net

**N**eurodiversity is a term used to describe the variation in how our brains process information and how we experience the world around us. It is estimated that 15–20% of the population are neurodivergent. This includes individuals diagnosed with neurodevelopmental conditions such as attention deficit hyperactivity disorder and autism, as well as a range of specific learning differences, such as dyslexia, dyspraxia and dyscalculia, and other associated conditions, including epilepsy and Tourette syndrome. As awareness of neuro-

## COMMON FORMS OF NEURODIVERSITY IN GP TRAINEES (& GPs)

### ■ Autism

- **Strengths** - focused thinking, attention to detail, honesty, pattern recognition, methodical approach and problem-solving
- **Challenges** - social communication, sensory processing, and adapting to changes in routine, overfocus on detail, stress & anxiety

### ■ Attention Deficit Hyperactivity Disorder (ADHD)

- **Strengths** - courage, creativity, empathy, energy, resilience, hyperfocus and the ability to thrive in fast-paced environments
- **Challenges** - focus, time management, emotional regulation, boredom and impulsivity.

## COMMON FORMS OF NEURODIVERSITY IN GP TRAINEES - 2

### ■ **Dyslexia**

- **Strengths** - verbal communication, empathy, problem-solving, narrative reasoning, and hands-on tasks
- **Challenges** - difficulty with reading, writing, concentration, and processing written information

### ■ **Other neurodiverse conditions** (e.g., dyspraxia, dyscalculia, etc.)

---

# TERMINOLOGY

## Neurodivergent

Individuals with e.g. autism, ADHD, dyslexia, dyspraxia, dyscalculia

## Neurotypical

Individuals who have the most common grouping of shared cognitive profile, and may be considered the 'normal' thinking patterns

## Labels

Autistic, ADHDer, AuDHDer, Alistic



---

## TERMINOLOGY - 2

### Masking

Masking is a strategy used by some autistic people, consciously or unconsciously, to appear non-autistic in order to blend in and be more accepted in society – this takes a huge cognitive toll and can lead to ‘autistic burnout’

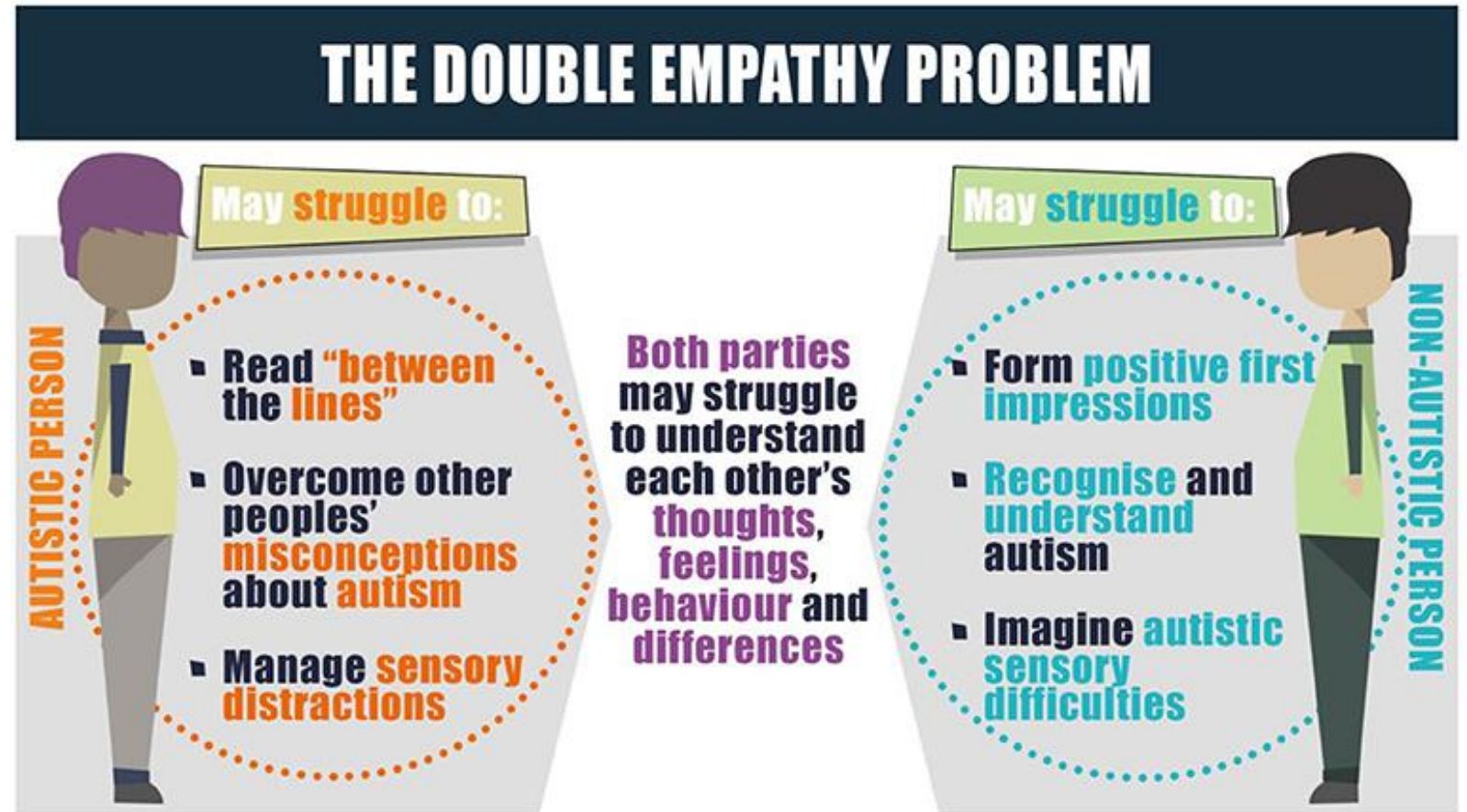
### Rejection sensitive dysphoria

An intense emotional response to perceived or actual rejection or criticism, often experienced by individuals with ADHD, characterized by overwhelming feelings of pain and difficulty regulating emotions – this can be a challenge when giving feedback

# DOUBLE EMPATHY PROBLEM

Autistic people do not inherently lack empathy as often supposed by people who see autism as pathological, but most autistic people may struggle in understanding and empathizing for non-autistic people

Whereas most non-autistic people also lack understanding and empathy for autistic people



By Crompton, DeBrabander, Heasman, Milton, and Sasson -  
<https://kids.frontiersin.org/articles/10.3389/frym.2021.554875>, CC BY 4.0,  
<https://commons.wikimedia.org/w/index.php?curid=112489317>

# CHALLENGES FACED BY JESSICA

## **Social Communication and Interactions**

Spontaneous  
interactions  
Cues  
Team dynamics

## **Sensory Sensitivities**

Sensitivity to  
loud sounds & to  
crowded spaces

## **Structured Routine and Flexibility**

Thrives in  
structured  
environments  
Tends to follow  
rigid routines

## **Focus and Task Switching**

Hyperfocus on  
tasks  
Difficult to  
transition  
between tasks  
quickly

**slido**

Please download and install the Slido app on all computers you use



## **Support strategies? Other considerations?**

① Start presenting to display the poll results on this slide.

---

# STRATEGIES TO SUPPORT JESSICA

**2 main aspects to supporting trainees in practice:**

- **Strategies that you can implement in collaboration with trainee (including referral to PSWS)**
- **Mandated by Equality Act (2010) (Occupational health - through lead employer and/or PSWS)**

# STRATEGIES TO SUPPORT JESSICA

## **Structured Communication and Expectations**

CS works with her to provide clear, detailed expectations  
Expectations of workload are clear

## **Sensory-Friendly Adjustments**

Accommodations  
e.g. quiet space/room,  
dimmed lights  
Designated breaks

## **Modified Social Interaction Approach**

Constructive feedback on patient interactions  
Social cues in meetings  
Ask to clarify

## **Time Management Support and Flexibility**

manage her time more effectively e.g. smaller tasks  
Using time management tools.



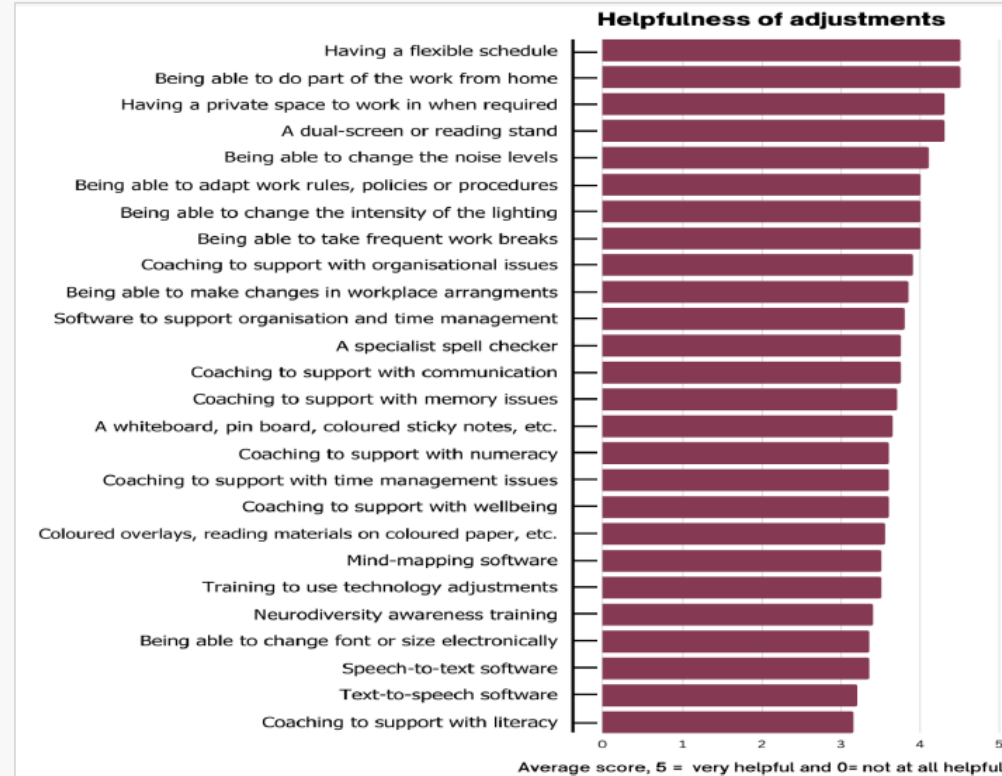
# PROFESSIONAL SUPPORT & WELLBEING SERVICE (PSWS)

## Neurodiversity

Each individual has a different cognitive profile with differing cognitive skills, for many these profiles overlap enough that the typical ways of learning and working are productive and effective. For some, there are more varied differences so typical ways of learning and working are less useful.

The PSWS is pleased to offer an expanded service of assessment, reporting and specialist support for Dyslexia, Dyspraxia and attentional difficulties. The assessment will be conducted by a member of our Learning Differences team who can provide specialist follow up support.

# WORK ADJUSTMENTS



McDowall, A., Doyle, N., & Kisleva, M. (2023). *Neurodiversity in Business: State of the Sector UK* (p. 45). Birkbeck, University of London.

990 Employees, 2023.

Note that most of these are cost neutral, or low cost compared to assessment.....



The World Needs More **Birkbeck**

# TRAINERS CHALLENGES

**Time management  
& organisation**

Appt timing  
Tasks

**Communication**

Trainer  
communication  
with ND trainee

**Organisational**

Adjustments –  
practical?  
Fair to other  
staff members?

**Own well-being**

Increased  
workload  
Support needed?

## TRAINERS PERSPECTIVE

- Neurodiversity – everyone is different, traits vary between individuals
- Trainees with ND may become a trainee in need – even with your support
- You are not alone, discuss with TPDs and consider referral to PSWS with trainees' consent
- ND is not an excuse for underperformance – to consider the challenges faced and allow adequate support to be given
- Consider your own well-being
- Consider your own traits – are you ND?

---

## SUMMARY

- Neurodiversity – awareness and diagnosis increasing
- Language and terminology around neurodiversity
- Trainees with ND may become a trainee in need without support
- ND is not an excuse for underperformance – to consider the challenges faced and allow adequate support to be given
- Resources accessed through PSWS & Occ health (lead employer)



# Questions ?



---

# THANK YOU

Neetul Shah

[neetulshah@nhs.net](mailto:neetulshah@nhs.net)

